


☐ If your name has changed, mark circle.

☐ If your address has changed, mark circle.

☐ If amended return, mark circle.

☐ If final return, mark circle.

**New Orleans Exhibition Hall Authority  
Additional Hotel Room Occupancy Tax  
and Food and Beverage Tax Return**

Louisiana Department of Revenue  
Taxpayer Services Division  
Sales Tax Section  
P. O. Box 91205  
Baton Rouge, LA 70821-9205  
(225) 219-7356  
(225) 219-2114 (TDD)

**Please use return envelope provided.**

FOR OFFICE USE ONLY.

Field flag

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Filing  
period

<b>Room occupancy tax</b>			
1	Number of occupied rooms/nights billed for the month reported		
2	Rate of tax per room/night: 10 to 299 room capacity – \$.50 per room/night, 300 to 999 room capacity – \$1 per room/night, 1,000 or more room capacity – \$2 per room/night	\$	
3	Tax due (Multiply Line 1 by Line 2.)	\$	00
<b>Food and/or beverage tax</b>			
4	Taxable sales of foods/beverages	\$	00
5	Tax Due (Food service establishments whose food/beverage sales last calendar year were between \$200,000 and \$499,999, multiply Line 4 by .5% (.005). Food service establishments whose food/beverage sales last calendar year were \$500,000 or more, multiply Line 4 by .75% (.0075).)	\$	00
6	Excess tax collected	\$	00
7	Total food/beverage tax (Add Line 5 and Line 6.)	\$	00
<b>Computation of tax due</b>			
8	Gross tax due (Add Line 3 and Line 7.)	\$	00
9	Vendor's compensation (1% of Line 8, if the return and/or remittance are not delinquent)	\$	00
10	Net tax due (Subtract Line 9 from Line 8.)	\$	00
11	Interest (1.25% per month from due date until paid)	\$	00
12	Penalty (5% of tax per month, maximum of 25%)	\$	00
13	Total tax, interest, and penalty due	\$	00

Make payment to:  
Department of Revenue. Do not send cash.

Pay this amount. ▶

**EFT Tax Code 04131**

Under the penalties of perjury, I declare that I have examined this return, including all accompanying documents, and to the best of my knowledge and belief, it is true, correct, and complete. If the return is prepared by a person other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has any knowledge.

Date	Signature	Signature of preparer other than taxpayer	Preparer ID
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This return is due on or before the 20th day of the month following the taxable period covered and becomes delinquent on the first day thereafter. Telephone Number  
If the due date falls on a weekend or holiday, the return is due the next business day and becomes delinquent the first day thereafter.

**Complete only if change in business status has occurred. Please print or type.**

Date business discontinued	Date business sold	Name of purchaser
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**NOTE:** If your business has been discontinued or sold, your registration certificate must be sent to the Department of Revenue with this report. If business is sold, the new owner should complete a new application for a separate number.



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